

PRINTER RUSH

(PTO ASSISTANCE)

Application : <u>10/695235</u>	Examiner : <u>Cherry, S</u>	GAU : <u>2863</u>
From: <u>BB</u>	Location: IDC <u>FMF</u> FDC	Date: <u>9/15/05</u>
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DOC CODE	DOC DATE	MISCELLANEOUS
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[RUSH] MESSAGE: _____

Please charge issue fee.

Thank You

[XRUSH] RESPONSE: Done

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2005-08-30 13:21

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Lexmark IP Law P 2/2

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless specified by block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notices.

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Paula D. Kiser
(Depositor's name)
Paula D. Kiser
(Signature)
8/30/05
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10695235	10/28/2003	Christopher Alan Adkins	2003-0258.01	4961

TITLE OF INVENTION: ANALOG ENCODER METHOD FOR DETERMINING DISTANCE MOVED

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/08/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHERRY, STEPHEN J	2863	702-158000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SW 122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Thompson Mine, LLP
2.
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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Lexington, KY 40550

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Elizabeth C. Jacobs

Date

August 30, 2005

Typed or printed name

Elizabeth C. Jacobs

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34,189

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033

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